

02-11-05
EV 327050896 US

IFW

PTO/SB/21 (04-04)
Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

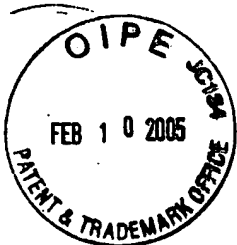
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/730,403	
	Filing Date	December 8, 2003	
	First Named Inventor	Thomas E. Barta, et al.	
	Art Unit	1625	
	Examiner Name	TBA	
Total Number of Pages in This Submission	4	Attorney Docket Number	3124/9A/US; Pfizer Ref: 31134A/USA; (6794-000017/DVE)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name David M. Gryte	Reg. No. 41,809
Signature			
Date	February 10, 2005		

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	David M. Gryte	Express Mail Label No.	EV 327050896 US
Signature		Date	February 10, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



EV 327050896 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Thomas E. Barta, et al.
Serial No: 10/730,403
Filed: December 8, 2003
Title: Aromatic Sulfone Hydroxamic Acids and Their Use as Protease Inhibitors
Confirmation No: 4538
Group Art Unit: 1625
Examiner: TBA
Attorney Ref: 3124/9A/US
Pfizer Ref: 31134A/USA
HDP Ref: 6794-000017/DVE

February 10, 2005

**ASSOCIATE POWER OF ATTORNEY AND
CHANGE OF CORRESPONDENCE ADDRESS**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

The undersigned, on behalf of Applicants hereby appoints the attorneys and patent agents associated with **Customer Number 28880** with full power to transact all business in the Patent and Trademark Office in connection with the above-referenced patent application.

All correspondence and telephone calls concerning the above-referenced application should be directed to the Applicants' attorney at the following address:

Todd Crissey, PTO Reg. No. 37,807
Pfizer Inc., Pfizer Patent Department -16/415S
2800 Plymouth Road
Ann Arbor, MI 48105
Telephone: 734-622-7813
Facsimile: 734-622-1553

Applicants believe that they do not owe any fee in connection with this filing. If, however, Applicants do owe any such fee(s), the Commissioner is hereby authorized to charge the fee(s) to Deposit Account No. **08-0750**.

Associate Power of Attorney and
Change of Correspondence Address
Application No. 10/730,403
February 10, 2005



Respectfully submitted,

A handwritten signature in black ink, appearing to read "David M. Gryte".

David M. Gryte, PTO Reg. No. 41,809
Harness, Dickey & Pierce, P.L.C.
7700 Bonhomme, Suite 400
Clayton, Missouri 63105
(314) 726-7500 (general tel)
(314) 726-7501 (fax)

Certificate of Mailing Under 37 C.F.R. 1.8

I certify that this correspondence is being deposited with the U.S. Postal Service on **February 10, 2005** with sufficient postage as first class mail (including Express Mail per MPEP§512), and addressed to **Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.**

A handwritten signature in black ink, appearing to read "David M. Gryte", written over a horizontal line.

DMG/CML



EV 327050896 US

PTO/SB/122 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.	Application Number	10/730,403
	Filing Date	December 8, 2003
	First Named Inventor	Thomas E. Barta, et al.
	Art Unit	1625
	Examiner Name	TBA
	Attorney Docket Number	3124/9A/US; Pfizer Ref: 31134A/USA; (6794 000017/DV5)

Please change the Correspondence Address for the above-identified application to:



Customer Number:

28880

OR

Firm or
Individual NameTodd Crissey
Pfizer Inc.

Address

Pfizer Patent Department-16/415S

Address

2800 Plymouth Road

City

Ann Arbor

State

MI

Zip

48105

Country

USA

Telephone

734-622-7813

Fax

734-622-1553

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 41,809.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Typed or
Printed Name

David M. Gryte, Reg. No. 41,809

Signature

Date

February 10, 2005

Telephone

314-726-7500

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.